



2815
JA

PATENT

I hereby certify that on the date specified below, this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

JUNE 25, 2004
Date

Carolyn L. Ross
Carolyn L. Ross

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/652,968

Confirmation No. : 4756

Applicant : Vishnu K. Agarwal

Filed : August 31, 2000

Attorney Docket No.: 501082.13 (98-0616.12)

Art Unit : 2815

Customer No. : 27,076

Examiner : Jose R. Diaz

Title : DEVICE AND METHOD FOR PROTECTING AGAINST OXIDATION OF A
CONDUCTIVE LAYER IN SAID DEVICE

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE UNDER 37 C.F.R. § 1.111

Sir:

Applicant acknowledges receipt of the Office Action dated March 26, 2004.

Please amend the above-identified application as follows:

Listing of the Claims begins on page 2 of this paper.

Remarks begin on page 4 of this paper.



JUN 29 2004

**FEE TRANSMITTAL SHEET
(FOR FY 2004)****Complete if Known**

Application No.	09/652,968
Filing Date	August 31, 2000
First Named Inventor	Vishnu K. Agarwal
Group Art Unit	2815
Examiner	Jose R. Diaz
Atty. Docket Number	501082.13

METHOD OF PAYMENT (Check One)

1. ☒ The Commissioner is hereby authorized to charge any additional fee required under 37 C.F.R. §§ 1.16 and 1.17 and 1.136(a)(3) and credit any over payments to Deposit Account No.: 50-1266; Deposit Account Name: DORSEY & WHITNEY LLP

2. ☐ Check Enclosed

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	<input type="checkbox"/> Utility Filing Fee	
1002	340	2002	170	<input type="checkbox"/> Design Filing Fee	
1003	530	2003	265	<input type="checkbox"/> Plant Filing Fee	
1004	770	2004	385	<input type="checkbox"/> Reissue Filing Fee	
1005	160	2005	80	<input type="checkbox"/> Provisional Filing Fee	
Subtotal (1)					\$ 0

2. EXTRA CLAIM FEES

Current Claims	Prior	Extra	Fee	Fee Paid
Total	5	20	= 0 x \$ 18 =	\$ 0
Ind.	3	3	= 0 x \$ 86 =	\$ 0
Multiple Dependent Claims			x \$ =	\$
Subtotal (2)				\$ 0

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent Claim
1204	86	2204	43	Reissue independent claims over original patent
1205	18	2205	9	Reissue claims in excess of 20 and over original patent

FEE CALCULATION (Continued)**3. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - Late filing fee or oath	\$
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	\$
1053	130	1053	130	Non-English specification	\$
1812	2,520	1812	2,520	For Filing a Request for <i>ex parte</i> Reexamination	\$
1804	920	1804	920	Requesting publication of SIR prior to Examiner action	\$
1805	1,840	1805	1,840	Requesting publication of SIR after Examiner action	\$
1251	110	2251	55	Extension for reply within first month	\$
1252	420	2252	210	Extension for reply within 2 nd month	\$
1253	950	2253	475	Extension for reply within 3 rd month	\$
1254	1,480	2254	740	Extension for reply within 4 th month	\$
1255	2,010	2255	1,005	Extension for reply within 5 th month	\$
1401	330	2401	165	Notice of Appeal	\$
1402	330	2402	165	Filing a brief in support of an appeal	\$
1403	290	2403	145	Request for oral hearing	\$
1814	110	2814	55	Terminal Disclaimer Fee	\$
1452	110	2452	55	Petition to revive - unavoidable	\$
1453	1,330	2453	665	Petition to revive - unintentional	\$
1501	1,330	2501	665	Utility/Reissue issue fee	\$
1502	480	2502	240	Design issue fee	\$
1503	640	2503	320	Plant issue fee	\$
1460	130	1460	130	Petitions to the Commissioner	\$
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	\$
1806	180	1806	180	Submission of IDS	\$
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	\$
1801	770	2801	385	Request for Continued Examination (RCE)	\$
Other fee (specify)					\$
Subtotal (3)					\$ 0

Total Amount of Payment: \$ 0**Submitted by:**

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Signature: *Marcus Simon*Date: *June 25, 2004*